AMENDMENT TRANSMITTAL LETTER						ATTORNEY'S DOCKET NO.	
					-OCN/ET	RD-28698-2	
SERIAL NO.	FILING DATE	-	EXAMINER	HI	ECEIVEL AL FAX CE	NTFR	
09/847,198	05/03/01		G. Colon				
IN RE APPLICATIO	N OF Deborah Ann Ha	itko et al.		JU	N 0 7 20	04	
FOR CONTROL	OF LEACHABLE MER	CURY II	N FLUORESCENT LAM	PS C	)FFI(	CIAL	
TO THE ASSISTANT	OMMISSIONER FOR PAT	TENTS :					
Transmitted herewith is	an amendment in the abo	ve-identifie	ed application. The fee has b	een calculated as si	hown below.		
CLAIMS AS AMENDED							
(1)	(2) CLAIMS REMAINING AFTER AMENDMENT	(3)	(4) HIGHEST NUMBER PREVIOUSLY PAID FOR	NO. OF EXTRA CLAIMS PRESENT	(6) RATÉ	(7) ADDITIONAL FEE	
TOTAL CLAIMS	16	MINUS	20 =	0	X \$18.00	\$0.00	
INDEP. CLAIMS	. 11	MINUS	10 =	1	X \$86.00	\$86.00	
ADDITIONAL FEE FOR USE OF MULTIPLE DEPENDENT CLAIM(S), IF NOT PAID PREVIOUSLY (once per application)					X \$290.00		
:				DITIONAL FEE		\$86.00	
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.    Please charge   \$86.00   to my Deposit Account No. 07-0868.    The Assistant Commissioner is hereby authorized to charge all required fees under 37 C.F.R. 1.16 or 1.17 or credit any overpayment to Deposit Account No. 07-0868.    Three copies of this sheet are enclosed.							
Time 7 date  Telephone No. (5)	518) 387-7122  I hereby certify that		Attorney or ager Reg. No. 43,225 espondence is being transit Office facelmile number 76	mitted to the Unite	n P. Vo		
		Ka	Signature B. L	Bughin		tD Pat. Form 3 //01/01)	